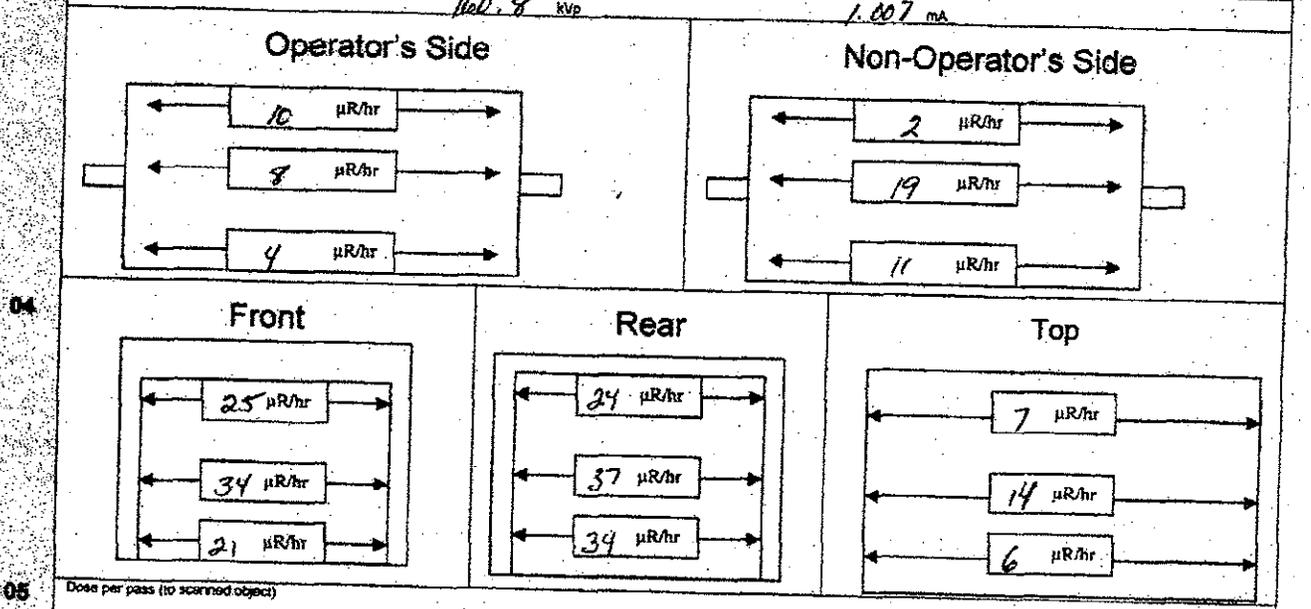


**X-RAY SYSTEM RADIATION  
LEAKAGE SURVEY AND  
COMPLIANCE REPORT**

FIELD TEST  
Baggage Partial  
Inspection Systems

Form R-0588-1 10/2/08

AA	1.1 Name and Address of Facility	Name of Facility <i>Hartsfield Jackson</i>	Region <i>East</i>	Street Address <i>600 North Terminal Parkway</i>
	City	<i>Atlanta</i>	State Code <i>GA</i>	Zip Code <i>30320</i>
DD	1.2 Specific Location of X-Ray System	Room No. or Other Location of System <i>Suite 314</i>	Person Interviewed <i>[Redacted]</i>	Telephone No. <i>[Redacted]</i>
	1.3 Certification Label Present	<i>Y</i>	Measuring Instruments: <i>Inovision</i>	Model: <i>451</i>
01	1.4 Manufacturer	A. Manufacturer <i>Rapiscan Systems, Inc.</i>		B. <i>OH145</i> Mfr. Code
	1.5 Add Product ID	<i>0 P2133 - 04173</i>	E. System Serial No. <i>7083504</i>	C. System Model No. <i>600DV</i>
	1.6 Date of Manufacture	<i>Mo: Aug yr: 2008</i>	1.4 Operator Instructions Available <i>Y</i>	1.5 Maintenance Schedule Available <i>Y</i>
	2.0 Warning Labels	2.1 Warning Label Present at Controls Stating "Caution: X-Rays Produced When Energized" <i>Y</i>	2.2 Warning Labels Present at Ports Stating "Caution: Do Not Insert Any Part of the Body When System is Energized, X-Ray Hazard" <i>Y</i>	2.3 Two Indicators Labeled "X-Ray On" Present at Controls <i>Y</i>
02	2.4 At Least One Indicator, X-Ray Marked "X-Ray On", Visible from Each Port <i>Y</i>	3.1 Captured Key Control <i>Y</i>	3.2 Prevention of X-Radiation by Interlocks <i>Y</i>	4.1 Some Part of the Body Can Be Inserted Through a Port into the Primary Beam <i>N</i>
	3.3 All Doors and Access Panels To the X-ray beam Prevent Generation of X-Radiation <i>Y</i>	3.4 Use of X-Ray Control Necessary to Resume Operation Following Interruption <i>Y</i>	5.0 Leakage Radiation Systems	5.1 Means Provided to Ensure Operator Presence at the Control Area <i>Y</i>
	5.2 Means Provided to Operator for Terminating Exposures of Greater than One-Half Second and Preventing X-rays (E-Stop Test) <i>Y</i>	6.0 Leakage Radiation	Rapiscan Systems Test Procedure Used <i>Rapiscan Systems XI-9321</i>	6.1 Scatter Block Description <i>Inovision base</i>
	6.2 Technical Factors <i>160.8 kVp</i>			<i>1.007 mA</i>



05 Dose per pass (to scanned object)

06 Surveyor Information

Surveyor Name (Print L, F, M)	Surveyor Signature	Date of Survey
<i>[Redacted]</i>	<i>[Redacted]</i>	<i>12-15-09</i>

I have received a copy of this Radiation Survey Form. Customer Signature *[Redacted]* Date *12-15-09*

ENTERED  
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